SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY Page 1
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature Agent Agent Addressee Addressee
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery The Corporation Company 92007
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Advanced Disposal Svcs et al c/o the Corporation Company 2000 Interstate Park Drive Suite	3:01ev846 (s)
Montgomery, AL 36109	Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7001 1140	0003 2239 8078

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540